

# Employee Termination Exit Checklist†

Employee Name: \_\_\_\_\_ Position: \_\_\_\_\_

Date of Hire: \_\_\_\_\_ Date of Termination: \_\_\_\_\_

## Topics to Discuss:

### \_\_\_\_ Salary/Payroll

Salary through last day of employment: \_\_\_\_\_

Accrued, unused vacation through last day: \_\_\_\_\_

Other adjustments (commission, travel expenses, etc.) \_\_\_\_\_

\_\_\_\_ Disclose any benefits included as taxable wages \_\_\_\_\_

Total of final paycheck: \_\_\_\_\_

### \_\_\_\_ Employee Benefits:

#### Health Insurance:

\_\_\_\_ COBRA information given to employee \_\_\_\_\_

Date coverage ends: \_\_\_\_\_

Reimbursement due employee for premium: \_\_\_\_\_

Insurance company notified: \_\_\_\_\_

#### Life Insurance:

Date coverage ends: \_\_\_\_\_

\_\_\_\_ Insurance company notified: \_\_\_\_\_

#### 401(k) Plan:

\_\_\_\_ Withdrawal/Rollover information given to employee \_\_\_\_\_

#### Profit Sharing Plan:

\_\_\_\_ Employee notified of any distribution \_\_\_\_\_

## Return of Company Property:

\_\_\_\_ Identification badge

\_\_\_\_ Keys and key cards

\_\_\_\_ Equipment (Laptop PC, pager, cell phone, tools, etc.)

\_\_\_\_ Credit cards

\_\_\_\_ Books and other printed material

\_\_\_\_ Other items list: \_\_\_\_\_

## Terminating employee's forwarding address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Completed by:

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_